1 Debtor(s) (Last Name First) and address(es)	2 Secured Party(les) and address(es)	3 For Filing Officer (Date, Time, Number and Filing Office)
Murphy, Robert J. & Debra	Mercantile Bank of Western	10va 4027
RR T	101 S. Fillmore	FILED NO.
Mount Ayr, IA 50854	Mount Ayr, IA 50854	V BOOK 3 PAGE 793
	REC & COMPUTER	
	AUD \$ RECORDED	98 APR 17 PM 2: 58
	RMF. \$ COMPARED	MIGHELLE
4. Check one only:		MICHELLE UTSLER RECORDER
Original financing statement real estate	record number 3122 Book 3 Pag	
Pre-1975 fixture filing county UCC number		,
Record owner of real		
Date file		, 19 93 Flied with Madison County Recorder
5. Check only one:		
	etatement between the foregoing Debter and Secu	ured Party bearing the file number shown above, is still effective.
<b>=</b>	_ <del>-</del> -	teral described in the financing statement bearing the file number
shown above.		
	otherwise specified below, the secured party certifie Secured Party's rights under the financing statemen	es that the assignee, whose name and address is shown below, has nt bearing the file number shown above.
D. TERMINATION The Secured Party ce		der the financing statement bearing the file number shown above.
		I to show \(\) Name, identity, corporate structure, or address of ure, or address of Debtor Party as indicated below; \(\) Other, as
Indicated below.	icated below, a name, identity, corporate straction	ule, of addless of Debtor Fany as indicated below, a Other, as
6. CHANGES:		
	•	
	·	
7. Debtor Signature(s) necessary only if filing an ame	andment: by signing Debtor(s) also acknowledge(s) in ME	receipt of a copy of this instrument: RCANTILE BANK OF WESTERN IOWA
	(Debtor) By:	en Bander)
	·	(Signature of Secured Party. See Instruction #2)

This STATEMENT is presented to THE FILING OFFICER for filling for record in real estate records:

**793** 

... , 19 <u>98</u>

Karen Bender, Vice President (Secured Party)
Type or Print all names (lowa Code 335.2)

April 16

\_ (Debtor)

ype or Print all names (lowa Code 335.2)

orm Approved (1-2-87) By: ELAINE BAXTER - Secretary of State

1. FILING OFFICER COPY - ALPHABETICAL